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State of Rhode Island Department of S	itate - Business Services Division	RECEIVED P.I. DEPT. OF STATE DUS SVOS DV
Annual Report for the y Limited Liability Comp → Filing period: February 1 → Filing Fee: \$50.00 → Penalty: Additional \$25.0	any	1013 MAR -6 P 2: 34
1. Entity ID Number	2. Exact name of the Limited Liability Company	
001677625	IRed White & Blue Mecha	inical LLC
3. NAICS Code	4. Brief description of the character of business conducted in R	

Heating & Cooling 5. State of Formation 6. Principal Office Address State 02890 Longwood ZI 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Name Street Address zip 02790 8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642. Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct. Name of Authorized Person 3-6-2023 la donado Signature of Authorized Person

> FILED 235 MAR 0 6 2023 BY 69 N4 Y

MAIL TO:

Website: www.sos.ri.gov